

Hamilton-Wentworth Department of Public Health Services

1992 Annual Report

Teaching Health Unit Affiliated with McMaster University

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Mission Statement

The Hamilton-Wentworth Department of Public Health Services (DPHS) strives for a healthier community through excellence in health promotion, health protection and disease prevention programs and services; the purpose being to achieve optimal health for the community.

Council of the Regional Municipality of Hamilton-Wentworth (Board of Health)

Regional Chairman	Reg Whynott
Chief Administrative Officer	W. McMillan Carson

Health and Social Service Committee

Councillors

Dominic Agostino (Chairman)	John Addison
Geraldine Copps	Tom Jackson
Mary Kiss	Bernie Morelli
Grant Shaw	Jack Southall
Dave Wilson	

Management Committee of the Department of Public Health Services

Medical Officer of Health	Dr. Fran Scott
Director of Dental Services	Dr. John Bakti
Teaching Health Unit Coordinator	
January to June (Acting)	Dr. Susan French
July to December	Dr. Larry Chambers
Associate Medical Officer of Health	Dr. Brian Gibson
Director of Administration	Dan McInnis
Director of Inspection Services	Frank Shimoda
Director of Nutrition Services	Helen Hale Tomasik
Director of Nursing Services	Jane Underwood
Director of Child and Adolescent Services	Hank Van Dooren

Locations

Hamilton	
25 Main St. West	100 Main St. East
107 Hess St. North	21 Hunter St. East
775 Upper Wentworth St.	351 Roxborough Ave.
2747 King St. East	
Dundas	Stoney Creek
115 King St. West	99 King St. East

We can be reached at ...

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Department of Public Health Services
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Hamilton, ON L8N 3P6
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Message from:



Dominic Agostino



Fran Scott

1992 was the first year of the newly elected Regional Council (our Board of Health) and Health and Social Services Committee (HSSC). It is a great privilege to work with a Department and Region which improve the quality of life of citizens in our community.

1992 was a tough year for this Region. The Committee and DPHS staff recognize it everyday in our work as we see the health effects of work closures, unemployment, poverty, increased mental stress, family violence, substance abuse, and illness.

Environmental Focus

The theme for the 1992 annual report is "Healthy Environments". Some key HSSC and DPHS activities were:

- * In May the Committee and Council supported the sponsorship of a McMaster University Environmental Health Chair. In August 1992, McMaster successfully received approval from the Tri-Council (Social Sciences and Humanities Research Council, Natural Sciences and Engineering Research Council, Medical Research Council) to recruit for this position and we hope to see this filled in 1993.
- * The HSSC has supported the DPHS investigation of environmental concerns such as water quality in rural areas, leachate from landfills and the health effects of consuming Great Lake fish.
- * In July, Council and the DPHS were represented at the Canadian Public Health Association Conference in Yellowknife, whose theme was Healthy Environments.
- * The Tobacco Prevention Sub-Committee of the HSSC liaised with the Hamilton-Wentworth Council on Smoking and Health. In the summer, the HSSC supported the DPHS smoking prevention program expansion which includes promotion of smoke-free environments. Two new smoking prevention positions were created with 100% funding from the Public Health Branch of the Ontario Ministry of Health. The HSSC received a large number of petitions for a Smoke Free planet which were forwarded on to local members of Parliament to encourage tougher federal legislation.
- * In late November, the DPHS staff gathered together to discuss each other's activities and celebrate the achievements of the past year (DPHS Annual Update). The role of the DPHS in implementing Vision 2020, Directions for Creating a Sustainable Region, was discussed. The DPHS was involved in many aspects of the Task Force's work (community focus groups, background and implementation report writing) and will continue to identify its area of responsibility and leadership in achieving the "Vision".

MESSAGE FROM DOMINIC AGOSTINO AND FRAN SCOTT

Other Committee and Council Initiatives

The HSSC made a number of significant decisions with the support of the DPHS.

- * Regional Council formally received its new three year Ontario Council on Community Health Accreditation award. Three years is the maximum award and is a bright marker of how highly public health peers view the DPHS and the HSSC.
- * The HIV risk reduction initiative, which was 100% funded by the Ontario Ministry of Health, included new positions and a van (motor vehicle) to provide street services. Community support contributed to the success of this very important program.
- * Citizens and agencies in Hamilton-Wentworth hosted a successful AIDS event to celebrate both World's AIDS day and the achievements of the AIDS Prevention Task Force. This was co-sponsored by the Region.
- * In February 1992, the 'Nutrition in Second Level Lodging Homes' study was released. The results influenced the nutrition recommendations in the Report of the Commission of Inquiry into Unregulated Residential Accommodation.
- * The HSSC supported submitting a proposal on Elder Abuse to the Ontario Ministry of Health which was prepared by Regional Social Services and the DPHS.
- * Within Council's goal to keep tax increases close to zero, the HSSC supported two programs to be funded entirely from new Regional dollars: Dental Treatment and the Second Level Lodging Home Health Program. Those decisions were not easy and in fact the DPHS still lost positions due to both Regional and Ministry constraints which caused increased stress on both the community in need and the DPHS's ability to respond.
- * The HSSC won an additional hearing session in Hamilton-Wentworth for the Ontario Ministry of Health's proposed new Public Hospitals Act. The HSSC Chairman presented a brief on behalf on the HSSC.
- * The HSSC discussed reports on self esteem, domestic violence and student sexual health. The HSSC requested a follow-up report from the DPHS about self-esteem strategies in our community.
- * The HSSC received and supported the Child and Adolescent Services Plan and the Children's Mental Health Committee Spectrum Report¹ about priorities for children's services.
- * The HSSC approved setting up a School Nourishment Task Force to work with our community partners (the three school boards and others) to address the issue of food security for school children.
- * The HSSC and DPHS have strengthened links with the Hamilton-Wentworth District Health Council through participation and information sharing on the Addictions Services Study, the Mental Health Plan and long term care.
- * The HSSC supported the amalgamation of the two Child and Adolescent Services offices and monitored progress on the upgrading of the Dundas and Mountain DPHS offices.

The following pages of this 1992 Annual Report outline other ways DPHS staff worked with members of our community to develop supportive environments for health.

Conclusion

New opportunities are opening up in 1993. The DPHS and HSSC will continue to be 'life-long' learners, adapt, take risks and show leadership in meeting public health challenges. One area we will be exploring will be formal acceptance of "The Ontario Ministry's Healthy Environment Mandatory Programs for Public Health".

We close by thanking members of HSSC, members of Regional Council and all staff in the DPHS and the Region for their efforts this past year in contributing to the healthy community we have and for which we strive.



Dominic Agostino
Chairman, Health & Social Services Committee



Fran Scott
Medical Officer of Health

INTERDISCIPLINARY PROGRAM/DIVISION MATRIX

O = Concept Leader

X = Program/Division Involvement

The interdisciplinary Program/Division Matrix below outlines the organization of the DPHS according to Divisions and Programs. A Concept Leader is responsible for the coordination of programs within 10 general areas such as Healthy Parenting, School Health and Healthy Adults (the "o"s in the matrix). Within these areas there were 22 specific programs such as Reproductive Health, Vaccine Preventable Diseases and Child and Adolescent Services. The "x"s in the matrix refer to activities where Division staff were assigned to a program area in 1992. Other interdisciplinary collaborations will be developed in 1993.

PROGRAMS	Medical/ Physician Consulting	Divisions					THU	
	Admin. Services	Nursing Services	Nutrition Services	Inspection Services	Dental Services	C&A Services	(Lib., Educ., Research)	
Healthy Children								
Healthy Parenting	x	x	O	x	x	x	x	x
* Reproductive Health	x	x	x	x	x	x	x	x
* Vaccine Preventable Dis.	x	x	x		x			x
School Health	x	x	O	x	x	x	x	x
* Child & Adolescent Services*	x	x					x	x
* Children in Need of Dental Treatment (CINOT)	x	x				x		
* Healthy Adolescents	x	x	x	x	x	x	x	x
* Regional Dental Treatment						x		
Healthy Adults	x	x	x	x	x	O		x
* 2nd Level Lodging Homes	x	x	x		x			x
* Mental Health Promotion	x	x	x					x
Healthy Elderly	x	x	x	x	x	O		x
Healthy Lifestyles	x	x	x	O	x			x
* Tobacco Use Prevention	x	x	x		x	x		x
* Sub. Abuse Prevention	x	x	x		x		x	x
* Alcohol & Drug Assessment Services **	x	x						x
* Nutrition Promotion	x	x	x	x	x	x	x	x
* Physical Activity Promo.	x	x	x	x				x
Healthy Sexuality	x	x	x				O	x
Communicable Disease	x	x	x		x		O	x
* Sexually Transmitted Dis.	x	x	x		x			x
* Tuberculosis Control	x	x	x					x
* Outbreak Control	x	x	x		x			x
Healthy Environments	x	x	x	x	O			x
* Food Safety	x	x		x	x			x
* Water Quality	x	x		x	x	x		x
* Rabies Control	x	x			x			x
* Infection Control in Instit.	x	x	x		x			x
* Emergency Response	x	x	x	x	x		x	x
* Non-Comm. Dis. Invest.	x	x	x		x			x
Community Health Status	x	x	x	x	x	x	x	O
Equal Access	x	x	x	x	x	x	x	O

* Child & Adolescent Services is a children's mental health service 100% funded by the Ministry of Community and Social Services.

** Alcohol and Drug Assessment Services is an assessment, referral and case management service funded 100% by the Community Mental Health Branch, Ontario Ministry of Health

HEALTHY ENVIRONMENTS

FACTS & STATS

- 9,000 visits to 3,300 food premises
- 22 outdoor events, fairs and festivals
- 400 "I'm Food Safety Wise" buttons issued
- 85 classes for 1,525 professional food handlers
- 4 display booths
- 13 tickets and 2 charges requiring court proceedings
- Food recall of 12 products

- Well water survey of 186 homes. 34% displayed high bacteriological levels, excessive nitrate concentrations or both.
- 180 public pools, spas and bathing beaches
- Survey of 710 homes

- 2520 inspections
- 228 development applications

Food Safety

- Inspections and licensing of restaurants, supermarkets, food and dairy plants and other food premises were conducted on a regular basis using a risk assessment protocol. Detailed inspections were also conducted in institutional premises.
- Festivals and other events such as Earthsong and the Hamilton Air Show were visited to ensure proper food safety for thousands of daily visitors. Food handlers received and wore "I'm Food Safety Wise" buttons after attending food safety classes.
- Food safety education was provided on a regular basis for novice and professional food handlers with each participant receiving a certificate.
- Food safety issues were featured in newsletters, newspapers and in environmental health displays at a number of events throughout the Region. Emphasis was placed on donated foodstuffs and food safety in the home.
- Although education was an important component of food safety, it was necessary at times to lay charges and issue tickets under the Provincial Offenses Act.
- Public Health Inspectors participated in a number of food recalls.

Water Quality

- Free bacterial analysis of drinking water supplies was available to all Regional citizens. Public Health Inspectors regularly provided interpretations of the results and furnished advice accordingly.
- A drinking water survey was conducted in a Flamborough community. Based on the survey findings, a recommendation was made to consider extending a municipally operated water supply to this area.
- Public bathing areas including Lake Ontario and Conservation area beaches, swimming pools and spas were subject to regular inspections. Warnings and closures were applied where necessary. Pool safety seminars were encouraged and provided on request to operators.
- A sanitary survey of homes within the watershed of Lake Niapenco in Glanbrook was conducted. Funding for replacement or repair of defective septic tank systems was available under the Ontario Ministry of the Environment Clean Up Rural Beaches program.

Private Sewage Disposal Systems (Environmental Protection Act of Ontario)

- Private sewage systems (septic tanks) were monitored relative to proposed land development, complaint investigations, sewage system assessments, installations of sewage systems, rezonings and land severances.

HEALTHY ENVIRONMENTS CONTINUED

- 6 surveys
- 108 homes

- Sanitary surveys (septic tank assessments) were conducted in Stoney Creek, Glanbrook and Hamilton to assess the need for extension of municipal sewers.

Infection Control in Institutions

- 1,375 visits to 133 institutions
- 16 institutional outbreak responses
- 24 hour on call service
- Infection Control Symposium and Education

- Staff were active on infection control committees in hospitals, nursing homes and day cares. These premises house the aged, the infirm, young children and other vulnerable members of society.
- Norwalk virus, *staphylococcus aureus* (pneumonia), and a food-borne illness were identified in outbreaks in high risk institutions. These outbreaks were investigated promptly and contained within the institutions.
- "Partners in Prevention - Infection Control in the 90's" was organized and presented in conjunction with McMaster University and the Ministry of Health.

Rabies Control

- 616 cats and dogs were quarantined
- 56 animals tested
- 4 were rabid
- Distributed rabies vaccine for 30 patients
- 612 school children attended rabies seminars

- The DPHS was responsible for investigating all reported cases of bites or other abnormal contacts with animals. Hamilton Society for the Prevention of Cruelty to Animals and local animal control officers assist with this program. No human cases were reported, however, a number of suspected animals were tested for rabies.
- The vaccine was distributed to physicians treating patients who were bitten by, or in contact with, suspected or confirmed rabid animals.
- Rabies education was provided, on request, to classes in primary schools.

Emergency Response

- 3 spills
- 1 mock disaster

- Response was made to spills in a steel plant, a soap products manufacturing plant and a hardware store.
- A mock disaster was successfully conducted to measure the ability of staff to respond quickly and effectively to an emergency situation.

Non-Communicable Disease Control

- 8 investigations

- Investigations were conducted into concerns of an excess number of birth abnormalities in a neighbourhood, asbestos in a school, and oil contamination of a dwelling. Close co-operation and consultation with other agencies is an integral part of this program.

Healthy Environments Demand Services

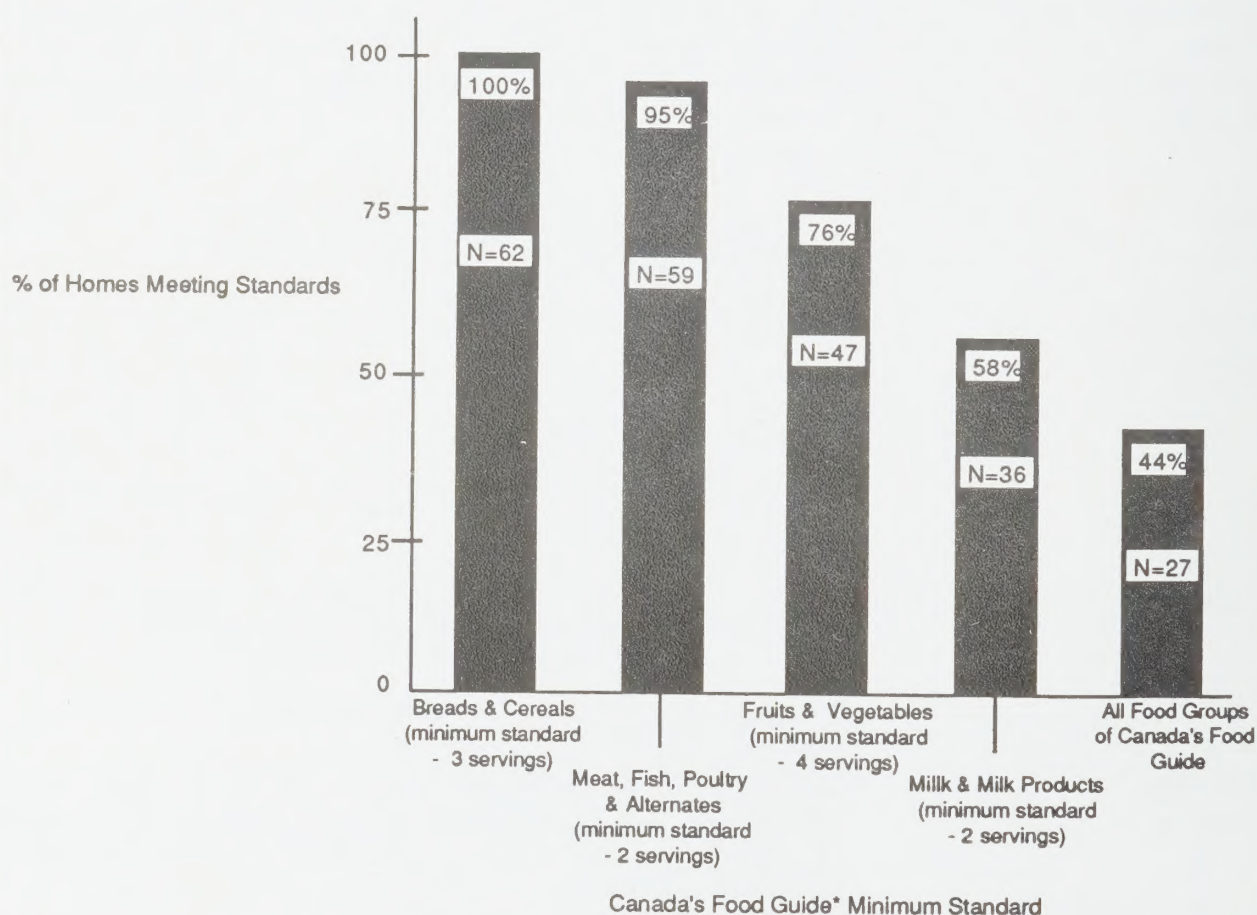
- 10,300 inspections
- 13 court charges

- Inspection staff responded to requests from the public related to health and the environment such as unfit housing, community sanitation and air quality. Court proceedings were required on occasion to correct health problems.

HEALTHY ENVIRONMENTS CONTINUED

- 2,400 non-food premises visits
- 1,928 Work Order Requests
- 21 Freedom of Information Act requests
- Non-food premises such as beauty salons and barbershops were visited for licensing purposes. Emphasis was placed on higher risk premises such as funeral parlours, tattoo parlours and arenas (air quality).
- Forty-six percent of all requests made under the Freedom of Information Act related to the DPHS. In addition, file searches were conducted for outstanding work orders in response to requests by real estate agents and lawyers. This program is self financing.

Contracted Second Level Lodging Homes (N=62) that Met the Minimum Food Group Standards for Foods Served According to Canada's Food Guide



* 1982 Canadian Food Guide

Woolcott DM, and Hedley M. Nutritional Value and Quality of Food Served in Contracted Second Level Lodging Homes in the Regional Municipality of Hamilton-Wentworth. University of Guelph. January 1992.

HEALTHY LIFESTYLES

FACTS & STATS

- 93% of men and 87% of women in Hamilton
-Wentworth consumed too much fat in 1990²
- 33% of men and 21% of women were above the healthy weight zone (BMI > 27) in 1990²
- 12% of women were below the healthy weight zone (BMI < 20) in 1990²
- 1,023 consultations and 19 professional workshops
- 2,034 participants involved in 59 tours and 60 community presentations
- 49 Nutrition Advisory columns in NOW and 15 FYI columns in EGO
- the Nutrition Resource Centre received 1,303 requests for the new guide in 5 weeks
- 25 day cares had their menus reviewed
- 40 day care cooks participated in a workshop
- 445 lunch room assistants received in-service education
- 3 programs for 128 participants
- 135 meetings and consultations
- 65 gardeners participated in the GardenShare pilot project

Nutrition Promotion

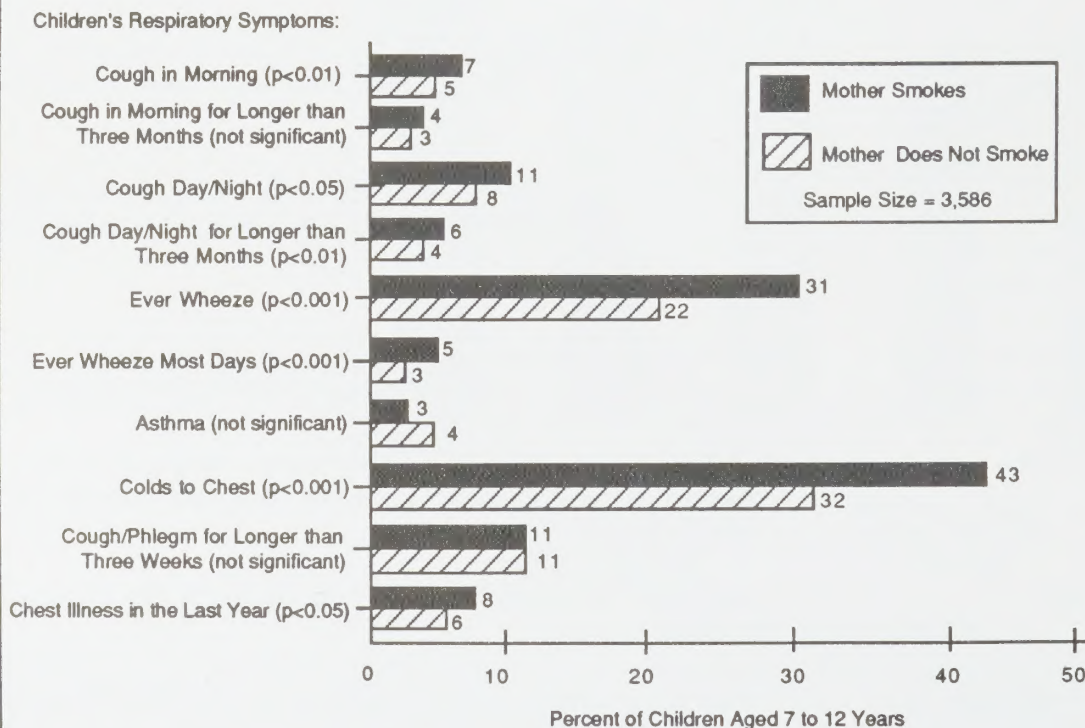
- The 1990 Ontario Health Survey reported that both men and women in Hamilton consume too much fat.
- The Survey reported more men than women had Body Mass Index (BMI) values above the healthy weight zone.
- The Survey reported some women below the healthy weight zone.
- Nutrition consultations were provided to professionals, agencies and groups in health, social services and recreation.
- Supermarket Safari and community presentations focused on: getting the best nutritional value with a limited budget, reducing fat intake, and attaining healthy weights.
- Nutrition information was disseminated through regular columns in *The Hamilton Spectator*.
- Canada's Food Guide on Healthy Eating was released on November 20th. Health and Welfare Canada made public health units the distribution site.
- A supportive environment for healthy eating in day care centres was facilitated through menu consultations and nutrition and cooking workshops.
- Staff assisted the Hamilton Board of Education in the implementation of their school food policy, including review of food service contracts.
- Pilot cooking and food demonstration programs were developed and implemented at three sites - Jamesville Community Centre, Dr. Davey School and St. Brigid's School.
- Nutrition staff supported community-initiated efforts to promote increased access to food.
- GardenShare was developed in collaboration with Greater Hamilton Food Share and Hamilton Garden and Flower Festival to increase the availability of fresh produce at emergency food centres.

HEALTHY LIFESTYLES CONTINUED

Tobacco Use Prevention

- 8,584 or 34% of adolescents age 16-19 were smokers in Hamilton-Wentworth ²
- 117,568 or 32% of Hamilton-Wentworth residents age 12+ were smokers ²
- Tobacco By-law Referrals
- Staff were members of The Hamilton-Wentworth Council on Smoking and Health and participated in the Council's educational and lobbying efforts.
- Staff were involved in tobacco use prevention education and awareness promotion in Hamilton-Wentworth schools.
- Information on the hazards of smoking and community smoking cessation programs were provided to expectant parents at prenatal classes and to parents and child caregivers during health education and health promotion sessions.
- Following a Regional Council recommendation, staff assisted an adhoc HSSC to develop a Regional Tobacco Control Policy, with the Chair of the Hamilton Wentworth Council on Smoking and Health, Regional Councillors and a representative from the Regional Police.
- Regional Council recommended Public Health Inspectors refer contraventions of Hamilton's Tobacco Control By-laws, when observed, to the City of Hamilton By-law Officers.

Impact of Mother's Cigarette Smoke on the Health of their Children, Hamilton, 1983



Source: Kerigan AT, Pengelly LD, Goldsmith JC, Garside BK. Hamilton Study: Effect of Environmental Factors on Respiratory Health of Children. Final Report. Health and Welfare Canada, 1983.

HEALTHY LIFESTYLES CONTINUED

Substance Abuse Prevention

- 8,358 or 6% of women and 29,799 or 21% of men who were current drinkers age 12+ were at moderate or high risk of developing alcohol-related problems in Hamilton-Wentworth in 1990²
- 601 people requested help
 - 327 assessed/referred
 - 88 received in-house counselling
- Staff participated in the District Health Council's Addictions Services Needs Study and Implementation Task Force.
- The Alcohol and Drug Assessment Services provided assessment, referral and case management services to persons with alcohol and other drug abuse and addiction problems.
- Two new staff were added to the program (funded 100% by the Ontario Ministry of Health) to meet demands.

Physical Activity Promotion

- 21 events in the workplace and community to a total audience of 282
- 986 expectant parents received information on physical activity
- Displays on Physical Activity/Healthy Weights/Healthy Eating were prepared and presented at special events.
- Seniors living in housing complexes were assisted in the development of physical activity programs.
- Active living messages were incorporated in all Reproductive Health Programs and all nutrition presentations to school teachers.

HEALTHY GROWTH & DEVELOPMENT

FACTS & STATS

- Hamilton-Wentworth has 57,500 children under 10 years old (17% were living in low income households)³
- 959 clients and families served, 12,080 encounters with children, adolescents and their families
- 17 series
- 160 classes
- 100 attendees

Healthy Children

- Seventeen percent of Hamilton-Wentworth children live in low income households. Low income is highly related to the health of children according to the findings of the Ontario Child Health Survey⁴
- Children, adolescents and their families continued to be the largest single client group in 1992.
- Parenting classes were conducted through two initiatives:
 - NOBODY'S PERFECT, an interdivisional education program for single parents of children from birth to five years of age.

HEALTHY GROWTH & DEVELOPMENT CONTINUED

- 17 series, 102 classes
- 152 attendees
- 3,025 calls in 1992 (53% more than in 1991)
- 4 issues for 167 child care centres
- 6 workshops for 154 participants
- 2,263 vision screening tests
- 7,107 new school entrants were screened for vision and hearing
- 6,509 grade 3 and other students were screened for vision
- 1,363 other students were screened for hearing
- 4,942 home visits
- 25,358 students attended 1,442 educational and self-help sessions in schools
- 2,011 citizens attended community development activities and another 1,005 attended special community projects facilitated by Public Health Nurses
- 30,858 children screened in the school year
- Parent Talk a program which addresses the concerns of families with infants under one year of age.
- The Parent Child Information Line (telephone number 546-3618) answered calls primarily on nutrition, breastfeeding and infant care.
- Nursery Nuggets newsletter was produced and sent to all child care centres.
- Infant and preschool nutrition workshops were provided to child caregivers. The "Feeding Infants and Children" Instructors' Guide was developed for the St. John Ambulance babysitting course.
- Children in child care centres received vision screening.
- Hearing and vision screenings were offered in the school system with an emphasis placed on early detection in the preschool and kindergarten population.
- An investigation of the effectiveness of routine vision screening for grade 3's was carried out. Of 3,930 children receiving vision screening, an estimated 66 children were identified with newly diagnosed vision problems. Evidence elsewhere has shown that when diagnosed children are left untreated, school performance is not affected. For these reasons, grade 3 vision screening was discontinued ⁵.
- Mothers recently home from hospital with a new baby and families with young children were visited. Public Health Nurses in the Parent-Child Program collaborated with the police, planning department, recreation department, Hamilton Housing and many other community agencies to support communities in meeting socio-environmental health needs of these families.
- Education and self-help sessions were held in schools. Topics most commonly discussed were nutrition, hygiene, substance abuse and growth and development. Self-help groups dealt with separation and divorce (NEW WAVE, LITTLE RIPPLES), bereavement, self-esteem, sexuality and substance abuse prevention (READY OR NOT, a course for parents of 8 - 12 year olds).
- Community development activities and projects included working with tenant associations and other community agencies to promote the health of the community. For example, an after hours social recreation program was offered at Lloyd George school, a nutrition program at G. L. Armstrong school, and parents advocating for traffic lights were assisted at Gordon Price school.
- The Children in Need of Dental Treatment program, a 100% provincially funded program, is intended to ensure that no child in Ontario suffers from dental neglect. Hygienists, using a dental mirror, screened all children aged 5, 7, 9, 11, and 13 years.

HEALTHY GROWTH & DEVELOPMENT CONTINUED

- *Staff identified approximately 1,250 children as being urgently in need of dental treatment*
- *More than 200 children received preventive dental care from September to December, 1992*
- *Over 8,000 children received dental education*
- *3 dental treatment clinics provided care to more than 1,200 children*
- *518 new referrals of children under 13*
- *6 Child Welfare Assessments*
- *20 play therapy training sessions each with 7 trainees*
- *132 children were screened for speech/language problems*
- *8 speech consultations*
- *Weekly consultations through July - August*
- *18 presentations to parents and professionals*
- *community interagency involvement on-going*
- *Waiting time for assessment was reduced by approximately 50% in 1992*
- Children found in need of dental care were referred to private dental practices or to the DPHS clinics for dental care. This total represents about 6.13% of those children screened for the Children in Need of Dental Treatment program.
- Dental Hygienists provided topical fluoride applications and instructions on cleaning and brushing teeth to children identified as being in need.
- Dental Assistants visited schools in the Region to provide lessons on dental health education. Each lesson was grade specific, and covered dental health topics such as proper brushing, nutrition, tooth development, the importance of plaque removal and prevention of periodontal disease. Preventive clinics were established for those children who were identified as being at high risk for dental caries.
- Two full time dentists operating out of three clinic locations (Hess, East End and St. Joseph's) treated more than 1,200 children.
- The Child and Adolescent Services Children's Program conducted multidisciplinary assessments and treatments involving individuals, groups and families.
- Child welfare assessments were negotiated with two Children's Aid Societies.
- Community professionals were given training in play therapy as a strategy to increase community services available to abused children.
- A Speech/Language Pilot Project screened children aged 3 to 4 years in 10% of licensed Child Care Centres to identify communication problems and provide early interventions to the children..
- Consultation to Child Care Centres was provided for childrens' speech and language development.
- Consultation was provided to the Hamilton Housing Authority Recreation Program staff to develop skills in facilitating group work and conflict resolution with children.
- Presentations and workshops relating to family violence, physical and sexual abuse, self-esteem and parenting were conducted.
- As recommended in the Spectrum Report¹ of the Child Mental Health Committee of the Association of Agencies for Treatment and Development, interagency collaboration was pursued to identify needs and coordinate services in the community.
- Initiation of the General Responsive Assessment Screening Process facilitated a more responsive and accessible children's mental health service for children and their families who were referred to the Child and Adolescent Program.

HEALTHY GROWTH & DEVELOPMENT CONTINUED

Reproductive Health

- *6,509 births occurred in Hamilton-Wentworth in 1991⁶*
- *Nutrition Resource Centre distributed 16,503 copies of fact sheets to the community*
- *417 or 6.4% infants had a low birth weight in Hamilton-Wentworth⁶*
- *891 new mothers mostly with their partners attended prenatal classes*
- The Hamilton-Wentworth Regional Lactation Committee produced five fact sheets to promote breastfeeding.
- "Best Start", a community program to prevent low birthweight babies, was awarded \$10,000 to focus on issues related to food access among new immigrants in the North Hamilton community.
- Prenatal classes were given to expectant parents in eight locations throughout the Region.

Healthy Adolescents

- *Hamilton-Wentworth has 57,045 persons 10 to 19 years of age³*
- *40 community presentations*
- *50 meetings with staff in three boards of education*
- *101 young offenders counselled*
- *488 participants in 32 groups*
- *8 planning meetings*
- *20 student participants*
- *3 issues for 138 educators*
- *16,500 participants in 887 groups*
- *1,649 consultations and 3,162 conferences in schools*
- *2 focus groups of 21 girls*
- Community presentations to parents, agency staff and adolescents outside schools covered topics such as adolescent sexuality and relationships, decision-making, sexually transmitted diseases, contraception, parenting issues (both for teen parents and parents of teens), violence prevention, services at the DPHS and bereavement.
- Interdivisional and interagency school health meetings were held with the three Boards of Education and the Tri-Board Health Liaison Committee.
- In support of the DPHS's Equal Access Program counselling, group work and staff education on health topics were provided to Arrell Youth Centre clients.
- Planning the new Health Centre continued at Waterdown High School with student leadership and participation of police and Alternatives for Youth.
- Issues of the Healthy Adolescent Nutrition Update were produced for Physical Education, Family Studies, Science and Guidance teachers for all secondary schools.
- Support groups and classroom presentations covered topics such as sexuality, violence, relationships and divorce.
- Consultations and conferences were provided to school staff, other professionals and agencies.
- Focus groups were conducted with teenage girls to understand their perspective on dieting.

HEALTHY GROWTH & DEVELOPMENT CONTINUED

- 12 consultations to closed custody settings
- 21 Young Offenders Act assessments
- 262 new referrals of children over 13
- 9 presentations to parents and professionals
- 14 anger management sessions with 2 secondary school groups
- Consultation was provided to Closed Custody Group Home staff related to specific client behaviour and staff training needs.
- The Adolescent Program conducted predispositional assessments for the Unified Family Court of Hamilton-Wentworth.
- The Adolescent Program provided interdisciplinary assessment and therapy including individual, group and family intervention.
- The Adolescent Program conducted workshops and presentations including topics of teen suicide prevention, parent-teen conflict and adolescent mental health.
- Collaboration with Association of Agencies for Treatment and Development, Chedoke Child and Family, and three Boards of Education led to development of "The Project for Promoting a Non-Violent Environment, An Approach to Reducing Aggression in the School Community".

Healthy Adults and Elderly

- Hamilton-Wentworth has 273,390 persons 20 to 64 and 60,460 persons 65 years of age and over ³
- 8,096 individual contacts and 2,449 group contacts (633 sessions) for adults 20-64 years
- 3,837 contacts 65-74
- 8,339 contacts 75+ years
- 300 presentations for seniors
- 2,940 attendees
- 50 attendees
- response to Long Term Care Redirection
- 179 employees participated
- 17 presentations to 492 seniors and 8 sessions with 127 caregivers
- 9 nutrition columns
- Home or telephone visits addressed topics such as physical activity, nutrition, stress management, smoking, substance abuse, bereavement and accessing the health care system.
- Presentations were given to seniors groups at the Hamilton Senior Centre, Salvation Army Golden Agers and seniors buildings.
- A community forum to assess health needs of Italian and Portuguese seniors was held at Kirkendall-Strathcona Neighbourhood House.
- The DPHS response to the Long Term Care Redirection was prepared with collaboration from all divisions.
- A Worksite Nutrition Program was developed and provided to all employees of Baycoat Industry.
- Nutrition presentations were provided to seniors and caregivers of the elderly.
- Nutrition was promoted to seniors through a regular column in Today's Seniors.

HEALTHY GROWTH & DEVELOPMENT CONTINUED

- 84 second-level lodging homes
- 1,484 residents (2,139 authorized capacity)
- Second level lodging homes house people who are developmentally challenged, seniors and persons with psychiatric problems. Public Health Nurses and Inspectors continued to visit these facilities to provide education and to assess whether the facilities are operating in compliance with municipal by-laws.

Central Information Service

- 818 referrals from other agencies
- 5,710 information calls (6% increase over 1991)
- Central Intake, staffed by Public Health Nurses, provided telephone information and received referrals.

Sexual Health

- 4 workshops
- 5 consultations
- 2,800 students saw productions
- 5,374 client contacts
- 550 presentations
- Workshops related to identification, prevention and treatment of victims of sexual abuse were provided for professionals in the community by Child and Adolescent staff.
- In collaboration with the Child Abuse Council, Adolescent Program staff consulted on the development of a treatment program for adolescent sexual offenders.
- The UTOO Teaching Theatre productions by secondary school students focused on sexual pressure in teen relationships.
- Birth control clinics in Dundas and Stoney Creek provided education, counselling on birth control, pregnancy, and clinical services to adolescents and young adults.
- Sexuality presentations were offered in schools, local agencies and to a variety of community groups including people who are developmentally challenged and persons with psychiatric problems.

COMMUNICABLE DISEASE CONTROL

Sexually Transmitted Diseases (STDs)

FACTS & STATS

- 374 presentations
- 810 hotline calls
- 867 reported cases of STDs
- 781 client contacts at the Special Immunology Services Clinic with a Public Health Nurse
- The STD program activities continued to include: presentations, a telephone hotline, counselling, contact tracing and partner notification, condom campaigns (2) in local bars, and clinical services at the Hamilton General Hospital including HIV Testing.
- A Public Health Nurse was seconded to the Special Immunology Services Clinic at Chedoke McMaster hospital.

COMMUNICABLE DISEASE CONTROL CONTINUED

- 791 client contacts through the street program
- 594 anonymous HIV tests
- The "Van" (motor vehicle) provided anonymous HIV testing and a Street Outreach Program on AIDS awareness and operated from 8 to 12 pm Tuesday to Friday and alternate Mondays.

Tuberculosis (TB) Control

- 34 TB cases (7.6 cases per 100,000)
- 198 contacts (11% skin tested positive) but no further TB cases were identified
- Active and reactivated cases of TB were investigated and their contacts identified.
- The TB team worked with the Hamilton Wentworth Lung Association to produce and broadcast a video on tuberculosis awareness for the public.

Outbreak Control and Vaccine Preventable Disease

- 1,262 investigations including:
 - 590 enteric (food-water borne)
 - 531 Hepatitis B
 - 141 other
- Confirmed cases:
 - 506 enteric, 68 pertussis, 49 measles, 14 hepatitis B, 7 encephalitis, 5 haemophilus B, 4 influenza, 4 invasive meningococcal, 3 rubella, 1 meningitis, 1 mumps
- 75% immunization confirmed in records of 84,705 students in the 3 school boards
- Public Health Nurse strategy on influenza vaccine acceptance and safety behaviours found immunization and safety changes among males
- Investigations of reported enteric and vaccine preventable diseases were conducted by a multidisciplinary team from nursing and inspection. Included were the investigations of 90 suspected food poisoning episodes. Staff collaborated with 105 schools in the investigation and control of reported vaccine preventable diseases.
- A total of 711 students were suspended for incomplete immunization records.
- Records confirmed that ninety-five percent of seniors and the infirm in residential care facilities were immunized against influenza.
- A total of 359 public health nurse clients aged 65 years and older were randomly allocated to receive a public health nurse intervention promoting either influenza immunization or safety behaviours. There was no statistically significant difference in immunization rates between the two groups (56.1% in influenza group and 56.6% in safety group). Males were significantly more likely to receive influenza immunization. The safety results indicate that 68 clients made a total of 103 safety changes, with almost equal proportions making changes in the safety and immunization groups (21.9% and 18.3%). A higher percentage of males than females reported making safety changes. This project emphasizes the need for further research on the determinants of health behaviours such as influenza immunization and safety behaviours among older persons.

RESEARCH/EVALUATION ACTIVITIES

FACTS & STATS

- 39 externally funded projects
 - 3 additional projects submitted for funding
 - 24 internally funded projects
 - 49 peer reviewed and other publications
 - 16 articles accepted to be published
 - 8 articles submitted for publication
 - 88 oral presentations and 5 poster presentations
- The DPHS continued its commitment to foster an inquiring environment which results in the planning, implementation and utilization of community health research.
 - Research/evaluation projects were conducted in all of the DPHS programs from 1990 to 1992 and are listed below.

Mandatory Program	
Healthy Children	7 projects
Healthy Adults	5 projects
Healthy Elderly	7 projects
Reproductive Health	4 projects
Sexual Health	2 projects
Sexually Transmitted Diseases	5 projects
Tobacco Use/Prevention	1 project
Nutrition Promotion	8 projects
Physical Activity Promotion	2 projects
Outbreak Control	1 project
Environment	2 projects
Community Health Status Information	4 projects
Practice of Public Health Nursing	3 projects
Factors Influencing Nursing Careers	3 projects
- 38 nursing students
 - 6 nutrition students
 - 4 medical students
 - 3 epidemiology students
 - 2 nursing students
 - 12 Community Health Work-In-Progress Rounds
 - 18 Community Medicine Residency Seminars were held through 1992.
- Nursing students were attached to research teams for a variety of research projects.
 - DPHS staff provided thesis consultation to 15 graduate level university students in 1992.
 - Rounds were held in the DPHS for staff, cross appointees and guests on a variety of topics.
 - Topic areas such as ethics, communicable disease control, special populations, and health and social service systems were covered in the Community Medicine Residency Seminars.

EDUCATION ACTIVITIES

FACTS & STATS

- 43 cross-appointees
- 4,392 hours of staff time
- 1,996 students in clinical/applied education experiences
- 19,828 hours of student time in contact with DPHS staff
- 12 continuing education activities
- 771 participants
- other education related activities
- community health learning packages
- 450 books
- 400 government documents
- 100 public health related journals
- over 400 computer databases of scientific/health literature
- 50 files on current topics in public health
- collection of health related press clippings
- Continuing efforts have been made by the DPHS to collaborate with a number of educational institutions in order to provide student education activities, coordinate education efforts and maximize the use of resources.
- The cross-appointees combine service with education and research responsibilities and were funded either 100% by the Ministry of Health through Teaching Health Unit funding or by cost-sharing with the Faculty of Health Sciences, McMaster University; The Division of Applied Human Nutrition, College of Family and Consumer Studies, University of Guelph; and/or the DPHS.
- The DPHS provided educational opportunities for health sciences and other education programs to promote interdisciplinary learning. Students from the following educational programs were involved in DPHS activities: medicine, Community Medicine and Family Practice post-graduate residents, nursing (BScN), Mohawk College nursing, breastfeeding certificate program, occupational/physiotherapy, occupational health, applied human nutrition, dietetic interns, graduate students in nutrition, MSc Design, Measurement and Evaluation Program, MHSc, MBA (health stream), public health inspection, dental assistants, health administration, health policy, gerontology, social work, child and youth worker, family relations and human development, social services diploma, psychology, medical anthropology, human kinetics, physical education, urban planning and marketing.
- Cross-appointees offered a variety of continuing education activities, such as workshops and presentations directed toward the DPHS, McMaster University, other health units in the Central West Region, physicians, pharmacists, and the Ontario Public Health Association members.
- Cross-appointees were also involved with curriculum development, course development and coordination, and administrative duties.
- Revisions were made to a number of existing public health problem-based learning packages. A learning package directory briefly describing the learning packages was distributed widely to students, programs and other health units.
- Since the establishment of the DPHS Library in 1986, use by DPHS staff has steadily increased. Library services now include:
 - computer searches of articles and documents
 - borrowing books and journals from the Hamilton Health Library Network
 - making interlibrary loans throughout North America
 - distributing press clippings, title pages of current issues of journals and other resources to staff and students at the DPHS

EDUCATION ACTIVITIES CONTINUED

- *1,194 individual requests in 1992*
- *5,286 items requested in 1992*
- In 1992, the Ontario Ministry of Health approved a proposal to establish a Central West Library Network to enable staff at six other health units (Brant, Haldimand-Norfolk, Halton, Niagara, Waterloo and Wellington-Dufferin-Guelph) in the Central West Region to access the services of the DPHS Library. An advisory committee with representatives from these health units and the Ministry of Health oversee the Network's operations.

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OTTAWA CHARTER FOR HEALTH PROMOTION



World Health Organization
Organisation mondiale de la Santé

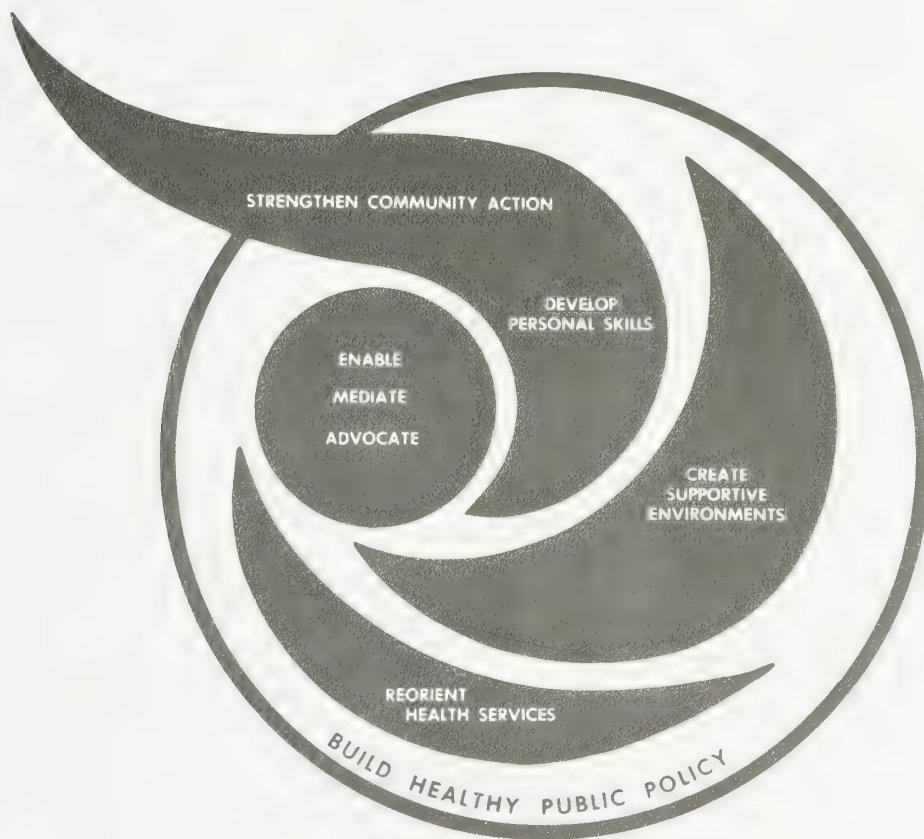


Health and Welfare
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Canadian Public
Health Association
Association canadienne
de santé publique

OTTAWA CHARTER FOR HEALTH PROMOTION



Ottawa Charter for Health Promotion. Canadian Journal of Public Health, 1986;77:426-427.

STATEMENT OF REVENUE & EXPENDITURE FOR THE YEAR ENDING DECEMBER 31, 1992

	BUDGET	ACTUAL
REVENUE		
ONTARIO MINISTRY OF HEALTH	11,340,540	11,355,130
REG. MUNICIPALITY OF HAMILTON – WENTWORTH	3,401,600	3,912,750
MINISTRY OF COMMUNITY & SOCIAL SERVICES	1,644,120	1,644,120
USER FEES & OTHER REVENUE	422,350	645,250
MINISTRY OF ENVIRONMENT & ENERGY	173,250	209,930
CITY OF HAMILTON	26,700	26,700
TOTAL REVENUE	17,008,560	17,793,880

EXPENDITURES

MINISTRY OF HEALTH – 75% FUNDED

Healthy Children	3,011,423	3,019,671
Healthy Adolescents	960,285	1,000,995
Healthy Adults	722,193	758,562
Healthy Elderly	846,537	887,853
Tobacco Use Prevention	157,642	164,958
Substance Abuse Prevention	317,275	330,673
Nutrition Promotion	340,907	344,809
Physical Activity Promotion	237,750	251,193
Reproductive Health	170,435	180,396
Sexually Transmitted Diseases	324,070	338,649
Vaccine Preventable Diseases	449,365	474,977
Tuberculosis Control	66,890	69,322
Outbreak Control	469,721	495,072
Infection Control in Institutions	190,182	202,856
Food Safety	949,287	987,345
Water Quality	154,327	141,702
Rabies Control	73,651	55,703
Emergency Response	29,045	31,878
Non-Communicable Disease Investigation	92,148	96,240
Equal Access *	--	--
Community Health Status Information *	--	--
	9,563,135	9,832,854
Administration	764,720	756,997
TOTAL 75% FUNDED	10,327,855	10,589,851

* General Program cost absorbed by other programs and external support such as the Health Priorities Analysis Unit, McMaster University

Dollar amounts are estimated based on assignment of staff time to programs.
Staff are typically involved in activities that meet more than one program standard.

STATEMENT OF REVENUE & EXPENDITURE FOR THE YEAR ENDING DECEMBER 31, 1992 CONTINUED

	BUDGET	ACTUAL
EXPENDITURES (Continued)		
MINISTRY OF HEALTH – 100% FUNDED		
Children In Need Of Dental Treatment	461,885	430,982
Aluminum In Water	49,150	49,150
Sexual Health	685,665	683,953
Tobacco Use Prevention	54,175	30,323
Teaching Health Unit	1,252,855	1,152,553
AIDS Prevention	373,895	348,761
Alcohol & Drug Assessment Services	431,790	431,790
Mental Health Promotion	272,730	272,730
Anonymous Testing	12,500	12,500
TOTAL 100% FUNDED	3,594,645	3,412,742
TOTAL MINISTRY OF HEALTH FUNDED PROGRAMS	13,922,500	14,002,593
REGION FUNDED PROJECTS		
Second Level Lodging Homes	130,000	130,000
Dental Treatment	266,500	272,220
Debt Charges on Capital Project	62,000	62,000
Region Cost Allocations	165,000	165,000
Program Transition Costs	118,750	118,750
Other Expenditures		537,157
TOTAL REGION FUNDED PROJECTS	742,250	1,285,127
OTHER FUNDING		
Ministry of Community & Social Services – Child & Adolescent Services	1,678,460	1,678,460
Ministry of Environment & Energy – Septic System Approvals	250,640	252,180
Sale of Public Health Nursing Services – Homecare	140,490	141,000
Sale of Public Health Nursing Services – Other Agencies		96,270
Property Work Order Program	72,630	54,580
Sale of Public Health Inspection Demand Services	26,700	26,700
Federal Research Grant – Community Health Monograph	28,500	28,500
Prenatal Class Fees	27,000	22,500
Septic Tank Fees	45,000	22,070
Clinic Supplies Fees	25,000	25,000
Transfers from Reserves	49,390	158,900
TOTAL OTHER FUNDING	2,343,810	2,506,160
TOTAL EXPENDITURES	17,008,560	17,793,880

Dollar amounts are estimated based on assignment of staff time to programs.
Staff are typically involved in activities that meet more than one program standard.

PEOPLE IN THE DEPARTMENT OF PUBLIC HEALTH SERVICES IN 1992

Adams, Michele
 Adsett, Sandra Lynn
 Alderson, Kathleen Ann
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 Bakti, John Robert
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 Bannon, Carolyn
 Banz, Monica Jacqueline
 Barham, Richard
 Barnett, Kelly Ann
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 Baumann, Andrea
 Beam, Malcolm
 Beauchamp, Patricia M.
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 Benner, David
 Bersenas-Cers, Zita
 Bethune, Jean
 Beyer, Linda Irene
 Black, Margaret
 Blake, Gary Steven
 Blaney, Olga Thelma
 Bochsler, Diane
 Bodden, Catherine Lois
 Bollinger, Nancy
 Borer, Diane Margaret
 Bowman, Ann Louise
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 Brady, Michael Firmin P.
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 Bui, Mai Anh
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 Clancy Sim, Anne

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